MULTIPLE DE NDENT CLAIM SERIAL NO. FEE CALCULATION SHEET FILING DATE (FOR USE WITH FORM PTO-875) APPLICANT(S) CLAIMS AFTER **AS FILED** AFTER I"AMENDMENT AFTER 2 - AMENDMENT **AS FILED** AFTER IND. I"AMENDMENT DEP. 1 AMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. TOTAL DO TOTAL DO TOTAL DEF TOTAL DEP TOTAL TOTAL CLDG CLANGS PTO-DIA GREY. ILAQ CLE. DEPARTMENT OF COMMERCE Putent and Trademark Office